Fill in this information to identify your case:		
United States Bankruptcy Court for the:	FILED	
Northern District of Illinois	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS	
Case number (If known):	Chapter you are filing underMAY 0 4 2016 Chapter 7 Chapter 11	
	Chapter 13 JEFFREY P. ALLSTEADT, CLERK	Check if this is an amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself
---------	----------	----------

Vacca for Honorous	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your tull name		
Write the name that is on your	Awenious	
identification (for example, your driver's license or	First name	First name
passport).	Middle name	Middle name
Bring your picture	Shaw	
identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you		
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
detaileren errenen err	ng rikyonnang kansan kang mang mang mang mang mang kang kang dan dan pang mang mang mang mang mang mang mang m	
your Social Security	xxx - xx - <u>3 9 1 6</u>	xxx - xx
number or federal	OR	OR
Individual Laxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx
	government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Bring your picture identification to your meeting with the trustee.  Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years  Include your married or maiden names.  Include your married or maiden names.  Conly the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  Swenious  First name  Middle name  First name  Middle name  Last name   Awenious  First name  Shaw  Last name  Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 First name  First name  Middle name  Last name  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

# Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 2 of 9

Debtor 1 Awenious	Shaw	Case number (if known)
r#st Name M	ddle Name Last Neme	
retressen prompt dit eller i fra distributer och ven som men menne de sistem i kriter och verse och som den de	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Number (EIN) you have used i		☐ I have not used any business names or EINs.
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live	TOTAL MENTAL PROPERTY AND	If Debtor 2 lives at a different address:
	_1140 63rd St	
	Number Street	Number Street
	Downers Grove IL 60516	
	City State ZIP Code	City State ZIP Code
	Dupage County County	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
AA-4-4	City State ZIP Code	City State ZIP Code
. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition. I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 3 of 9

Debtor 1	AWENIOUS First Name Middle No	ame	Sha\ Last Nar			Case number (ii	known)	
Part 2:	Tell the Court Abo	ut Your	Bankru	ptcy Case				
Bankr	napter of the uptcy Code you	Check for Ban	one. (Fo kruptcy	r a brief description of eac (Form 2010)). Also, go to t	h, see <i>No</i> he top of p	tice Required by 1 page 1 and check	1 U.S.C. § 34. the appropriat	2(b) for Individuals Filing te box.
are ch under	oosing to file	☐ Cha						
		☐ Cha	apter 11	I				
		☐ Cha	apter 12	?				
		<b>☑</b> Cha	apter 13	3				
i. How y	ou will pay the fee	loca you sub with 21 I ne App 1 red By I less pay	al court rself, you mitting a pre-ped to publication quest than 1: the fee	idge may, but is not req 50% of the official pove	ents. If your may uired to, rty line thoose the	may pay. Typica check, or money our attorney may bu choose this op a Fee in Installment of request this op waive your fee, nat applies to younis option, you method.	Ily, if you are order. If you pay with a contion, sign an ents (Official tion only if you and may do ur family size must fill out th	e paying the fee ur attorney is credit card or check and attach the Form 103A).  Du are filing for Chapter is so only if your income is and you are unable to the Application to Have the
. Have you filed for bankruptcy within the		□ No		North and District	F 7 1900			
last 8 y	ears?	☑ Yes.	District	Northern District	When	07/06/2015 MM / DD / YYYY	Case number	15-23104
			District	Northern District	When	02/26/2013	Case number	13-07452
			District		\ 6.00	MM/ DD/YYYY		
			District		When	MM / DD / YYYY	Case number	
Are any	bankruptcy	☑ No		***************************************				
	ending or being a spouse who is	Yes.	Debtor				Relationship to	you
not filing this case with you, or by a business partner, or by an affiliate?					When			if known
			Debtor				Relationship to	you
								if known
Do you residen	rent your	□ No.	Go to li	ne 12. ur landlord obtained an evi				ant to stay in your
			🛭 No.	Go to line 12.				
			☐ Yes	. Fill out Initial Statement A	About an E	Eviction Judgment	Against You (	Form 101A) and file it with

# Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 4 of 9

Debtor 1	Awenious First Name Middle Nam	ne	Shaw Last Name	*****	Cas	e number (if know	wn)	
art 3:	Report About Any I	Busines	ses You Own as a S	ole Propri	ietor			
	ou a sole proprietor	☑ No.	Go to Part 4.					
of any busin	/ full- or part-time ess?		Name and location of t	nueinece				
A sole	proprietorship is a	00	Traine and todaton or	703H 1C33				
individu	ss you operate as an ual, and is not a te legal entity such as		Name of business, if any	**************************************				
	oration, partnership, or		Number Street		•			
sole pro	ave more than one oprietorship, use a te sheet and attach it		1-1/12-14-14-14-14-14-14-14-14-14-14-14-14-14-					
to this p			City					
			City			State	ZIP Code	
			Check the appropriate	box to desc	ribe your busines	:\$:		
			☐ Health Care Busine	ess (as defin	ned in 11 U.S.C.	§ 101(27A))		
			☐ Single Asset Real B				)))	
			☐ Stockbroker (as de				•	
			☐ Commodity Broker	(as defined	in 11 U.S.C. § 10	01(6))		
			☐ None of the above					
Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small		any of tr	ent balance sneet, state lese documents do not d I am not filing under Ch	exist, follow	erations, cash-flo the procedure in	w statement, 11 U.S.C. § 1	and federal income tax return or if 1116(1)(B).	
busines	s debtor, see C. § 101(51D).	☐ No.	Io. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
	Report if You Own o	r Have	Any Hazardous Prop	perty or A	ny Property Ti	nat Needs I	Immediate Attention	
proper	ty that poses or is		145 41 11 1					
of imm identifi public i	to pose a threat inent and able hazard to health or safety?	☐ Yes.	What is the hazard?					
propert	ou own any ty that needs late attention?		If immediate attention i	s needed, w	vhy is it needed?	······································		
perishab that mus	nple, do you own le goods, or livestock t be fed, or a building ds urgent repairs?							
			Where is the property?	Number	Street	***************************************		
				City			State ZIP Code	

#### Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 5 of 9

Debtor 1	Aweniou	10	Shaw	Case number (if known)
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to rece	eive a briefing	about
credit counseling becau		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 6 of 9

Debtor 1	AWENIOUS First Name Middle Na	Shaw Inc Last Name	Case number (##	inown)
Part 6:	Answer There ou			
rait 0:	Answer These Que	estions for Reporting Purpo	ses	
16. What I	kind of debts do	as incurred by an individ	arily consumer debts? Consumer de ual primarily for a personal, family, or ho	bts are defined in 11 U.S.C. § 101(8) usehold purpose."
		No. Go to line 16b.  Yes. Go to line 17.		
		16b. <b>Are your debts prima</b> money for a business or i	arily business debts? Business debts nvestment or through the operation of the	s are debts that you incurred to obtain e business or investment.
		☐ No. Go to line 16c.☐ Yes. Go to line 17.		
		16c. State the type of debts yo	ou owe that are not consumer debts or bu	siness debts.
17. Are yo Chapte	u filing under er 7?	☑ No. I am not filing under C	Chapter 7. Go to line 18.	
any ex	estimate that after empt property is	Yes. I am filing under Chap administrative expense	ter 7. Do you estimate that after any exe es are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
exclud admini	ed and strative expenses	□ No		
are pai	d that funds will be le for distribution	☐ Yes		
	cured creditors?			
	any creditors do	<b>2</b> 1-49	1,000-5,000	25,001-50,000
you est	timate that you	50-99 100-199	5,001-10,000 10,001-25,000	<b>5</b> 0,001-100,000
en til en er en	ett och stagen staget ett stage på ett staget som skillender som sjensynder på kommette okkommet, må kommet et	200-999	10,001-25,000	☐ More than 100,000
	uch do you	<b>2</b> \$0-\$50,000	□ \$1,000,001-\$10 million	\$500,000,001-\$1 billion
be work	e your assets to	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion
		\$500,001-\$300,000	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion
e. How mi	uch do you	<b>2</b> \$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion
estimat to be?	e your liabilities	\$50,001-\$100,000	□ \$10,000,001-\$50 million	\$1,000,000,001-\$1 billion
to be:		\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion
art 7: S	ign Below	4900,001-\$1 million	■ \$100,000,001-\$500 million	☐ More than \$50 billion
or you		I have examined this petition, ar correct.	nd I declare under penalty of perjury that	the information provided is true and
		If I have chosen to file under Ch of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, i understand the relief available under ea	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
		If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).
		I request relief in accordance wit	th the chapter of title 11, United States C	ode, specified in this petition.
		I understand making a false state with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a	IIT IN TINES UP to \$250,000, or imprisonme	money or property by fraud in connection nt for up to 20 years, or both.
		×	× ×	
		Signature of Debtor 1		of Debtor 2
		Executed on 05/02/2016	Executed	on
Control of the Colombia of the	hil Whoths Union Salebard and a serious demanders (1811-1811-1811-1811-1811-1811-1811-181	MM / DD /Y	YYY	MM / DD / YYYY

# Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 7 of 9

or your atto							
	by one	I, the attorney for the debtor(s) named in to proceed under Chapter 7, 11, 12, or 13 available under each chapter for which the notice required by 11 U.S.C. § 342(b)	his petition, declare that I have inf of title 11, United States Code, are person is eligible. I also certify the	ormed indicated	the det explai	otor(s) about eli ned the relief	igibility
f you are not ly an attorne	represented y, you do not	knowledge after an inquiry that the information	ation in the schedules filed with the	petitic	n is in	correct.	/E ! IQ
eed to file th	nis page.	×	ъ.				
		Signature of Attorney for Debtor	Date	MM	/ Di	D /YYYY	-
		Printed name					
		Firm name					
		Number Street					
		City	State	ZIP Co			
			0.000	LII 00	40		
		Contact phone	Email address				
		Bar number	State				

# Case 16-15239 Doc 1 Filed 05/04/16 Entered 05/04/16 10:50:25 Desc Main Document Page 8 of 9

Debtor 1	Awenious First Name Middle Name	Sha Bast Na		с	ase number (if known)	
bankrupi attorney	if you are filing this tcy without an	should ur themselv	nderstand that ma es successfully. I	any people find it e	extremely difficu cy has long-tern	n financial and legal
an attorn	e represented by ley, you do not ile this page.	To be succe technical, a dismissed hearing, or firm if your	cessful, you must co and a mistake or ina because you did no cooperate with the case is selected for	orrectly file and handl action may affect you it file a required docu court, case trustee, l	le your bankruptcy r rights. For exam iment, pay a fee o U.S. trustee, bank is, you could lose	r case. The rules are very ple, your case may be n time, attend a meeting or ruptcy administrator, or audit your right to file another
		court. Ever in your sch- property or also deny y case, such cases are r	n if you plan to pay a edules. If you do no properly claim it as you a discharge of a as destroying or hic andomly audited to	a particular debt outs of list a debt, the debt exempt, you may no all your debts if you do ding property, falsifying	ide of your bankru may not be disch of be able to keep o something dishon ng records, or lyin have been accura	re required to file with the uptcy, you must list that debt arged. If you do not list the property. The judge can prest in your bankruptcy g. Individual bankruptcy ate, truthful, and complete.
		hired an att successful, Bankruptcy	orney. The court will you must be familiated Procedure, and the	II not treat you differe ar with the United Sta	ently because you ates Bankruptcy C urt in which your o	w the rules as if you had are filing for yourself. To be ode, the Federal Rules of case is filed. You must also
		Are you aw consequence No Yes	are that filing for bar ces?	nkruptcy is a serious	action with long-t	erm financial and legal
		Are you awa	are that bankruptcy or incomplete, you c	fraud is a serious cri could be fined or impi	me and that if you risoned?	ir bankruptcy forms are
		Did you pay  No Yes. Nan	ne of Person			rou fill out your bankruptcy forms?  gnature (Official Form 119).
		have read a	nd understood this i	that I understand the notice, and I am awa my rights or property	re that filing a bar	filing without an attorney. I kruptcy case without an y handle the case.
		x /			*	
		Signature of [			Signature of De	ebtor 2
		Date	05/02/2016 MM / DD / YYYY		Date	MM / DD / YYYY
		Contact phone	(773) 964-2116		. Contact phone	V
		Cell phone			Cell phone	***************************************

Email address

Email address

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In Re:		(	)	
			)	Case No.
Debtor (s)			)	Chapter
Awenious	Shaw		)	13

### List of Creditors

City of Chicago 121 N Lasalle St.	
Chicago IL 60602 Consumer Portfolio SV	
Consumer forttollo sv	)
PO BOX 57071 Frving, CA 92619	
Good Samaritan Hospit	a/
Good Samaritan Hospit 3815 Highland Aue	
Downers Grove, IL GO	1.2
Village of Downers Gre 801 Burlington flue	VC
Downers Grove, IL 60	515